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27581 7590 05/21/2004

MEDTRONIC, INC.
710 MEDTRONIC PARKWAY NE
MS-LC340
MINNEAPOLIS, MN 55432-5604

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Molly Chleback	(Depositor's name)
<i>Molly Chleback</i>	(Signature)
June 21, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/735,826	12/13/2000	Lary R. Larson	P-8003	4912

TITLE OF INVENTION: METHOD FOR STACKING SEMICONDUCTOR DIE WITHIN AN IMPLANTED MEDICAL DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/23/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
UMEZ ERONINI, LYNETTE T	1765	438-689000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Daniel G. Chapik
2. Girma Wolde-Michael
3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Medtronic, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Minneapolis, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.

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(Authorized Signature)

Daniel G. Chapik (43,424)

(Date)

6/18/04

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06/22/2004 AAD0F02 00000098 132546 09735826
01 FC:1501 1330.00 DA
02 FC:1504 300.00 DA

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**Medtronic**

Facsimile Cover Sheet

P-8003.00

To: Office of Publications
Company: U.S. Patent and Trademark Office
Phone:
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From: Daniel G. Chapik
Company:  **Medtronic**
Phone: 763 514 3066
Fax: 763 514 6982

Date: June 18, 2004

**Pages including this
cover page:** 4

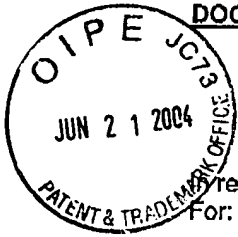
Comments: In re Application of: Lary R. Larson
For: METHOD FOR STACKING SEMICONDUCTOR DIE WITHIN AN IMPLANTED
MEDICAL DEVICE
Serial No.: 09/735,826
Filed: December 13, 2003

Attached please find the following documents:

- X Issue Fee Transmittal
- X PTOL FORM 85B
- X Fee Addressee for Receipt of PTO Notices Relating to Maintenance Fees

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**DOCKET NO: P-8003.00****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****FEE TRANSMITTAL**We are Application of:
For:Lary R. Larson et al.
METHOD FOR STACKING SEMICONDUCTOR DIE WITHIN AN IMPLANTED
MEDICAL DEVICESerial No.:
Filed:**09/735,826**
December 13, 2000

CERTIFICATE OF MAILING UNDER 37 CFR 1.8: I hereby certify that this **FEE TRANSMITTAL** and the paper(s), as described herein, are being sent via facsimile No. (703) 746-4000 to the Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 21st day of June, 2004.

Signature

Molly Chlebeck
MOLLY CHLEBECK
Printed NameMail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached:

- X Fee Transmittal
- X PTOL FORM 85B
- X Fee Addressee For Receipt Of PTO Notices Relating To Maintenance Fee

- X Please charge Deposit Account 13-2546 \$1,330.00 Issue Fee and \$300.00 publication fee for a Total of \$1,630.00.

- X Applicant believes that no extension of time is required. However, if an extension of time is required, please consider this a petition therefore to provide for the possibility that applicant has inadvertently overlooked the need for an extension of time and charge same to Deposit Account 13-2546.

Date

6/18/04
Daniel G. Chapik
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No. 27581